06-12-26

PART B - FEE(S) TRANSMITTAL



and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings Fee(s) Transmittal. This certificate cannot be used for any other accomp papers. Each additional paper, such as an assignment or formal drawing have its own certificate of mailing or transmission. | | | |
|---|--|--|--|--|---|--|--|
| 22918 75 | | | | Ce | rtificate of Mailing or Tran | smission | |
| PERKINS COIE | LLP | | | I hereby certify that t | his Fee(s) Transmittal is bein | ng deposited with the | |
| P.O. BOX 2168 | | | | I hereby certify that this Fee(s) Transmittal is being deposited with the U States Postal Service with sufficient postage for first class mail in an en- addressed to the Mail Stop ISSUE FEE address above, or being fac | | | |
| MENLO PARK, C | A 94026 | | | transmitted to the USI | PTO (571) 273-2885, on the | date indicated below. | |
| /5009 WEFECH5 000000 | 39 09461604 | | | Tina M. I | 2 4 /7 - 2// 2 | (Depositor | |
| 2501 8001 | 700.00 OP | | | gune 8, | 1. (Ungsan) 2006 | (Sig | |
| APPLICATION NO. | 39.00 pp FILING DATE | | FIRST NAME | D INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION N | |
| 09/461,684 12/14/1999 | | | DEINIEI | R LAUS | 7636-0020.30 | 4142 | |
| TITLE OF INVENTION: RESTRICTED ANTIGEN F | | ETHODS FOR E | ENHANCEM | ENT OF MAJOR HISTOCO | MPATIBILITY COMPLEX | CLASS I | |
| APPLN. TYPE | SMALL ENTITY | ISSUE F | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | \$700 | | \$0 | \$700 | 06/08/2006 | |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | 7 | | |
| DIBRINO, MARIANNE NMN | | 1644 | i | 424-184100 | - | | |
| 1. Change of correspondence CFR 1.363). | e address or indication of "Fe | e Address" (37 | 2. For prin | nting on the patent front page, I | ist , Gina | C Freschi | |
| | Correspondence | (1) the na | mes of up to 3 registered pate OR, alternatively, | nt attorneys | C 11CBCIII | | |
| Address form PTO/SB/12 | lence address (or Change of (22) attached. | Sorrespondence | _ | me of a single firm (having as | _{a membera 2} Perki | ins Coie LLI | |
| ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. | | | registered attorney or agent) and the names of up to | | | | |
| PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN | 37 CFR 3.11. Completion of | low, no assignee | data will app T a substitute (B) RESIDE | pear on the patent. If an assig | COUNTRY) | document has been fi | |
| Please check the appropriate | assignee category or category | ries (will not be pr | rinted on the p | patent): 🗖 Individual 🙀 | Corporation or other private gr | roup entity Gover | |
| 4a. The following fee(s) are | enclosed: | | o. Payment of | | | | |
| Issue Fee | | | | in the amount of the fee(s) is e | | | |
| | mall entity discount permitte | | | by credit card. Form PTO-203 | | andit anni arrama d | |
| XXAdvance Order - # of | Copies 13 | | ne Dire ובאה Deposit A | ctor is hereby authorized by ch Account Number 50-220 | dige the required fee(s), or cr (enclose an ex | tra copy of this form). | |
| | (from status indicated above | • | | | | | |
| • • | MALL ENTITY status. See | | | cant is no longer claiming SMA | | | |
| The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco | is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate | e Fee and Publica vill not be accepted int and Trademark | tion Fee (if and different | ny) or to re-apply any previous e other than the applicant; a reg | ly paid issue fee to the applic gistered attorney or agent; or | cation identified above the assignee or other p | |
| | 0 | olii. | | _ Date | une 8, 200 No. 52,062 | 6 | |
| Authorized Signature | | | | , , | | | |
| - | a: a = | | | _ Registration | No. 52,062 | | |



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RE APPLICATION OF:

Laus, et al.

APPLICATION No.: 09/461,684

FILED: December 14, 1999

FOR: COMPOSITIONS AND METHODS FOR

ENHANCEMENT OF MAJOR

HISTOCOMPATIBILITY COMPLEX CLASS I RESTRICTED ANTIGEN PRESENTATION

EXAMINER: DiBrino, Marianne

ART UNIT: 1644

CONF. No: 4142

Transmittal of Issue Fee and Advance Order

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance dated March 8, 2006, applicants herewith submit the following:

- - 1) Issue Fee (37 C.F.R. § 1.18(a)):
 ☐ Small Entity: \$700.00
 - 2) Fee (\$39.00) for 13 advance copies of the printed patent (37 C.F.R. § 1.19(a)(1)(i))
- ☑ Enclosed is a check for \$739.00 to cover the fees.
- Please charge any additional fees necessary for consideration of this paper to Deposit Account No. **50-2207**.

Respectfully submitted,

Date: 9une 8, 2006

Gina C. Freschi

Registration No. 52,062

Correspondence Address:

Customer No. 22918